

ISSUE SLIP STAPLE AREA (for additional cross references)

NAME	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		7-2-01
O.I.P.E. CLASSIFIER		10	7-10-01
FORMALITY REVIEW	Thur	1117	08, 17-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓		
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions
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